



# Counseling and Psychological Services

## Reassignment Request Form

Name \_\_\_\_\_ PID \_\_\_\_\_ DOB \_\_\_\_\_

Reassignments are done at CAPS on Thursdays. CAPS makes every attempt to honor the preferences of clients but cannot guarantee assignment to an expressed preferred clinician. At peak times during the semester or because of previous clinical recommendations, a client may be referred back to a previous therapist. CAPS has a policy that you may only request reassignment two times. If you fail to connect to a therapist after a 2<sup>nd</sup> request for reassignment, you may not be eligible for services for the rest of that semester.

1. Why are you returning to CAPS? Please check all that apply.

- I did not complete treatment.
- I did not return after initial assessment.
- I would like to continue working on the same presenting concerns.
- I have a different concern or problem.
- I had a difficult time connecting to resources off campus.

2. Therapist Preferences \_\_\_\_\_

3. Have you previously attended or utilized any of these CAPS services? Please check all that apply.

- Workshops (drop in, no advanced notice required)
- Group Therapy
- Therapy Assisted Online (TAO)
- Therapy Assisted Online (Self Help)
- Crisis hotline afterhours
- Crisis appointment but not individual ongoing therapy
- None of the above

I agree with and understand the information provided in this document. This information may be entered into my file by CAPS front desk staff. I am responsible for understanding CAPS policy around reassignments. Any questions, please contact CAPS at 407-823-2811.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please call next Monday morning to schedule your next counseling session.

After completion, please return in person/fax to CAPS (Building 27) Fax: 407-823-5415